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PTO/SB/05 (11-00) Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION **TRANSMITTAL**

MISCHO-1 Attorney Docket No. Mischo, Donald J First Inventor METHODS AND APPARATUS FOR RECYCLING ASPHALT SHINGLE MATERIA

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Express Mail Label No.

APPLICATION ELEMENTS ADDRESS TO: Box Patent Application								
See MPEP chapter 600 concerning utility patent application contents.			ADD		x Patent A			
1. Submit on original and a application for processing			7. CD-ROM or CD-R in duplicate, large table or					
Applicant claims small entity status See 37 CFR 1.27			Computer Program (Appendix) 8 Nucleotide and/or Amino Acid Sequence Submission					
Specification [Total Pages 44]] 3. X (preferred arrangement set forth below)				(If applicable, all necessary) a. Computer Readable Form (CRF)				
Descriptive title of the invention Cross Reference to Related Applications				b. Specification Sequence Listing on:				
- Statement Rega	arding Fed spo	nsored R & D		i CD-ROM or CD-R (2 copies); or				
 Reference to sequence listing, a table, or a computer program listing appendix 				ii paper				
- Background of t - Brief Summary	the Invention			c. Statements verifying identity of above copies				
 Brief Description 	n of the Drawir			<u>A</u>	CCOMPANYING	APPLIC	ATIC	ON PARTS
 Detailed Descrip Claim(s) 	otion			9	Assignment Pape	•	heet &	
- Abstract of the	Disclosure			10.	37 CFR 3.73(b) 8 (when there is ar			Power of Attorney
4. X Drawing(s) (35 U.	.S.C. 113) [Total Sheets 8]]	11.	English Translati	on Docume	ent (if a	* *
5. Oath or Declaration [Total Pages 2]]]	12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations				
a. X Newly executed (original or copy)				13 Preliminary Amendment				
b. Copy from a prior application (37 CFR 1 63 (d)) (for continuation/divisional with Box 18 completed)			")	14 X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
i DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s)			15 Certified Copy of Priority Document(s) (if foreign priority is claimed)					
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).				Request and Certification under 35 U.S C. 122 (b)(2)(B)(I). Applicant must attach form PTO/SB/35				
6. Application Data Sheet. See 37 CFR 1.76 or its equivalent. Other:								
18. If a CONTINUING APPLIC or in an Application Data She			supply t	he requ	isite information belov	and in a j	orelimi	nary amendment,
Continuation	Divisional [Continuation-in-part ((CIP)	of	f prior application No	/		
Prior application information	Examiner				Group Art Unit.			
For CONTINUATION OR DIVISION 5b, is considered a part of								
The incorporation can only be		en a portion has been in	advertent	ly omitte	d from the submitted			
19. CORRESPONDENCE ADDRESS								
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Country	Country Telepi			one	one (815) 987-9820 Fax (815)9		(815)987-9869	
Name (Print/Type)	Keith Frant	Z		Regis	stration No. (Attorn	eylAgent)	3	7828
Signature					-18-01			

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)	710	.00

Complete if Known				
Application Number				
Filing Date				
First Named Inventor	Mischo, Donald J.			
Examiner Name				
Group Art Unit				
Attorney Docket No.	MISCHO-1			

METHOD OF PAYMENT	FEE CALCULATION (continued)						
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES						
Deposit indicated fees and credit any overpayments to	Large Small Entity Entity						
Account Number		Fee Description Fee Paid					
Deposit	Code (\$) Code (\$)						
Account Name	105 130 205 65 Surcharge -	fate filing fee or oath					
Charge Any Additional Fee Required Under 37 CFR 1 15 and 1 17	127 50 227 25 Surcharge - cover sheet	late provisional filing fee or					
Applicant claims small entity status	139 130 139 130 Non-English	specification					
See 37 CFR 1 27 2. Payment Enclosed:	147 2,520 147 2,520 For filing a r	equest for ex parte reexamination					
Payment Enclosed: Check Credit card Order Other	Examiner ad						
FEE CALCULATION	113 1,840* 113 1,840* Requesting Examiner ac						
1. BASIC FILING FEE	115 110 215 55 Extension fo	or reply within first month					
Large Entity Small Entity	116 390 216 195 Extension fo	or reply within second month					
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 890 217 445 Extension fo	or reply within third month					
(*/	118 1,390 218 695 Extension fo	or reply within fourth month					
101 710 201 355 Utility filing fee 710.00	128 1,890 228 945 Extension fo	or reply within fifth month					
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Ap	peal					
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief	in support of an appeal					
114 150 214 75 Provisional filing fee	121 270 221 135 Request for	oral hearing					
SUBTOTAL (1) (\$) 710.00	138 1,510 138 1,510 Petition to in	stitute a public use proceeding					
000101112(1) (4)	140 110 240 55 Petition to re	evive - unavoidable					
2. EXTRA CLAIM FEES Fee from	141 1,240 241 620 Petition to re	evive - unintentional					
Extra Claims below Fee Paid	•	fee (or reissue)					
Total Claims 9 -20** = 0 X = Independent 3 3** = 0	143 440 243 220 Design issue	e fee					
Claims J - J - J - J - J - J - J - J - J - J	144 600 244 300 Plant issue f	ee					
Multiple Dependent	122 130 122 130 Petitions to t	the Commissioner					
Large Fuelly D. H. F. W.	123 50 123 50 Processing f	fee under 37 CFR 1.17(q)					
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180 126 180 Submission	of Information Disclosure Stmt					
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20		ach patent assignment per nes number of properties)					
102 80 202 40 Independent claims in excess of 3		mission after final rejection					
104 270 204 135 Multiple dependent claim, if not paid	(37 CFR § 1						
109 80 209 40 ** Reissue independent daims over onginal patent		Iditional invention to be 37 CFR § 1 129(b))					
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for	Continued Examination (RCE)					
and over original patent	169 900 169 900 Request for of a design	expedited examination application					
SUBTOTAL (2) (\$)	Other fee (specify)						
**or number previously paid, if greater, For Reissues, see above	Reduced by Basic Filing Fee Paid	SUBTOTAL (3) (\$)					

SUBMITTED BY				Complete (if applicable)		
Name (PnntiType)	Keith Frantz		Registration No. (Attorney/Agent)	37828	Telephone	(815) 987-9820
Signature	Kent	Frank			Date	4-18-01

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